

City of Dunwoody
41 Perimeter Center East Ste 250
Dunwoody, GA 30346
Phone (678) 382-6700
Fax (678) 382-6701

DEPARTMENT OF FINANCE

CITY OF DUNWOODY BUSINESS REGISTRATION
OFFICIAL MAIL, LOCATION, OR DESCRIPTION CHANGE REQUEST

Account#: _____

Name: _____

Mailing Address: _____

INTER OFFICE USE ONLY													
DATE ISSUED: _____ Permit No.: _____ SIC/NAICS No.: _____ Class _____ Type _____													
ZONING:													
APPROVED _____ DENIED _____ BY _____ DIST. _____ LOT _____ BLOCK _____ PARCEL _____													
CLEARANCES:													
POLICE _____ FIRE _____ HEALTH _____ CO _____ H.O.P. _____ OTHER _____													
(Please Enter New Mailing Address Above/ Print items 1-12 in blue or black ink./ Your signature is required in item 11.)													
1. Change Address Of: Description <input type="checkbox"/>						2. Type of Ownership Change (circle one)							
Mailing <input type="checkbox"/> Owners <input type="checkbox"/> Business(Physical) <input type="checkbox"/>						From: Single Partnership/Association Corporation							
						To: Single Partnership/Association Corporation							
3. Move Date:						4. Status Change Date:							
M M D D Y Y Y Y						M M D D Y Y Y Y							
5. Account No.													
6. Old Business Name													
7. New Business Name													
8a. If Business Moved, Print Business Name													
8b. OLD Address													
8c. OLD APT. or Suite#													
8d. OLD CITY						8c. State		8d. ZIP					
9a. NEW Address													
9a. OLD APT. or Suite#													
9b. NEW CITY						9c. State		9d. ZIP					
10a. OLD Business Process Description													
10b. NEW Business Process Description													
11. Print and Sign Print: _____ Sign: _____						12. Date Signed:		M M D D Y Y Y Y				OFFICIAL USE ONLY Received Date _____ BY _____	

Mail To: City of Dunwoody, Finance Department
P.O. Box 888074, Dunwoody, GA 30356